Attorney Docket No.

# PATENT APPLICATION TRANSMITTAL

First Inventor David A. Boeke Title Cooperative Medical Shopping System Express Mail Label No. EL457887473US ADDRESS TO:

(only for new	nonprovisional a 1,53(b)		ations under 37 CFF	2
APPI	ICATION	FI	EMENTS	

See MPEP Chapter 600 concerning utility patent application

contents. 1. Fee Transmittal Form (e.g., PTO/SB/17) (submit an original and a duplicate for fee processing)

Applicant claims small entity status. 3. Specification [Total Pages 13]

(Preferred arrangement set forth below) - Descriptive Title of the Invention

- Cross Reference to Related Applications

- Statement Regarding Fed sponsored R&D

- Reference to sequence listing, a table, or a computer program listing appendix

- Background of the Invention

- Brief Summary of the Invention

- Brief Description of the Drawings (if filed)

- Detailed Description - Claim(s)

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- Abstract of the Disclosure

4. Drawing(s)(35 USC 113) [Total Sheets11] 5. Oath or Declaration [Total Pages3]

a. Newly executed (original or copy)

Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed)

i. DELETION OF INVENTOR(S) Signed statement attached deleting see 37 CFR 1.63(d)(2) and 1.33(b).

inventor(s) named in the prior application,

Washington, DC 20231 7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)

Commissioner for Patent Box Patent Application

Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)

a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. ☐ CD-ROM or CD-R (2 copies); or ii. ☐ paper

c. Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS 9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement ☐ Power of Attorney (when there is an assignee) 11. English Translation Document (if applicable) 12. Information Disclosure Statement

Copies of IDS Citations (IDS)/PTO-1449 13. Preliminary Amendment

14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)

15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Request and Certifications under 35 U.S.C. 122

(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.

17. Cther

<ol><li>Application Data Sheet.</li></ol>	See 37	CFR 1.76
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18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: ☐ Continuation ☐ Divisional ☐ Continuation-in-Part (CIP) of prior application No.: filed

Prior application information: Examiner Group Art Unit:

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

 □ Customer Number or Bar Code Label 000027777 or □ Correspondence Address below Name: Philip S. Johnson, Esq.

Address: Johnson & Johnson

One Johnson & Johnson Plaza New Brunswick, NJ 08933-7003 USA

20. TELEPHONE CONTACT

Please direct all telephone calls or telefaxes to Verne E. Kreger, Jr. at: Telephone: (732) 524-1239 Fax: (732) 524-2808

21. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

NAME Verne E. Kreger, Jr. Reg. No. 35231 SIGNATURE

DATE

June 11, 2001

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## **FEE TRANSMITTAL**

Complete if Known		
Application Number		
Filing Date		
First Named Inventor	David A. Boeke	
Group Art Unit		
Examiner Name		
Attorney Docket Number	J&J-2025	

## **FEE CALCULATION**

#### CLAIMS AS FILED

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$710.00
TOTAL CLAIMS	1 - 20 =	0	x 18.00	\$ 0.00
INDEPENDENT CLAIMS	1 - 3 =	0	x 80.00	\$ 0.00
MULTIPLE DEPENDENT CLAIMS		N/A	\$270.00	
			TOTAL FEES	\$ 710.00

## METHOD OF PAYMENT

- ☐ The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/J&J-2025/VEK. Three copies of this sheet are enclosed.

SUBMITTED BY:	Complete (if applicable)
Typed or	
Printed Name Verne E. Kreger, Jr.	Reg. No. 35231
Signature	Deposit Account
Signature / Cine Steel Date: 6/11/01	No. 10-0750

#### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: David A. Boeke

For : Cooperative Medical Shopping System

### Express Mail Certificate

"Express Mail" mailing number: EL457887473US

Date of Deposit:

June 11, 2001

I hereby certify that this complete application, including specification pages, claims, formal drawings, Declaration and Power of Attorney, and Assignment, is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, Washington, D.C. 20231.

Martin Rizzi

(Typed or printed name of person mailing paper or fee)

Signature of parson mailing paper or fee)